

Sample Volunteers Equal Opportunities Monitoring Form

We aim to be an equal opportunity employer, and we select/recruit volunteers irrespective of age, sex, marital status, class, sexual orientation, race, colour, nationality, ethnic origin, religion, employment status, political belief, unrelated criminal conviction, disability or caring responsibility. In order to monitor the effectiveness of our equal opportunities policy we request all applicants to provide the information requested.

What is your employment status?

Not actively seeking work	<input type="checkbox"/>
Employed	<input type="checkbox"/>
Unemployed	<input type="checkbox"/>
New Deal	<input type="checkbox"/>
Retired	<input type="checkbox"/>
Student	<input type="checkbox"/>
Other (please specify below)	<input type="checkbox"/>

What is your ethnic group?

Choose one section from (a) to (e) then tick the appropriate box to indicate your cultural background

(a) White

British	<input type="checkbox"/>
Irish	<input type="checkbox"/>
Any other white background (please write below)	<input type="checkbox"/>

(b) Mixed

White and Black Caribbean	<input type="checkbox"/>
White and Black African	<input type="checkbox"/>
White and Asian	<input type="checkbox"/>
Any other mixed background (please write below)	<input type="checkbox"/>

(c) Asian or Asian British

Indian	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>
Any other Asian background (please write below)	<input type="checkbox"/>

(d) Black or Black British

Caribbean	<input type="checkbox"/>
African	<input type="checkbox"/>
Any other Black background (please write below)	<input type="checkbox"/>

(e) Chinese or Other ethnic group

Chinese	<input type="checkbox"/>
Any other background (please write below)	<input type="checkbox"/>

Would you consider to be disabled? (whether registered or not)

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

Religion (optional)

None	<input type="checkbox"/>
Christian	<input type="checkbox"/>
Buddhist	<input type="checkbox"/>
Hindu	
Jewish	
Muslim	
Sikh	
Any other Religion (please write below)	

Are you Female or Male?

Female	<input type="checkbox"/>
Male	<input type="checkbox"/>

How old are you?

<18	<input type="checkbox"/>
18-24	<input type="checkbox"/>
25-34	<input type="checkbox"/>
35-44	<input type="checkbox"/>
45-59	<input type="checkbox"/>
>60	<input type="checkbox"/>